

# Renter Assistance Claim (for income received in 2003) 9000R

**STEP 1****Name and address**

Your first name				Initial		Last name			
Spouse's first name				Initial		Last name			
Present home address — number and street, PO Box or rural route						Apt. no.		PMB no.	
City, town, or post office						State		ZIP Code	

**STEP 2****Social security number**

Your social security number

Spouse's social security number

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**IMPORTANT:**

Your social security number is required.

**STEP 3****Filing status**

- Are you a United States citizen? Check "Yes" or "No" . . . • 1. ☐ YES ☐ NO  
If you checked "Yes," skip line 2 and go to line 3.  
If you checked "No," go to line 2.
- Benefit Eligibility for Noncitizens** . . . • 2a.  
If you are not a citizen of the United States, go to page 10. If you have a qualifying alien status for the United States, enter your alien status code from the chart on page 10 on line 2a. Then enter your alien registration number on line 2b and your date of entry into the United States on line 2c. (MM/DD/YYYY)  
• 2b. Alien Status Code  
• 2c. Alien Registration Number  
Date of Entry  
• 2c. / /  
Date of Birth
- Check the appropriate box if you were **one** of the following on December 31, 2003:  
☐ A. 62 years or older (see Note on page 5, line 3a) . . . • A ☐  
☐ B. Under 62 and blind . . . • B ☐  
☐ C. Under 62 and disabled (not blind) . . . • C ☐
- Enter your date of birth (example: 0 5 / 2 1 / 1 9 3 8) . . . • 4. / /  
You must enter your date of birth MM DD Y Y Y Y  
Date of Birth  
*See instructions on page 5 to see if you must attach a proof document to your claim. If you cannot check one of the boxes, STOP HERE. You do not qualify to file for a Renter Assistance claim.*

**STEP 4****Rental information**

Complete line 5 through line 7.

- Enter the total number of months during 2003 that you lived in a qualified rented residence in California.  
See instructions . . . • 5. \_\_\_\_\_ months
- If the address where you lived during 2003 is different than the address you entered in Step 1, or if the address in Step 1 is a post office box, enter your 2003 residence address. (If more than one rented residence attach a list.)  

Street Address	City
• _____	
State and ZIP Code	
• _____ RENTED FROM ____ / ____ / ____ TO ____ / ____ / ____	
- Enter the name, address, and telephone number of your landlord or the person to whom you paid rent during 2003. (If more than one landlord attach a list.)  

NAME _____	
ADDRESS _____	APT. OR UNIT NO. _____
CITY _____	STATE and ZIP CODE _____
TELEPHONE ( ) _____	

**STEP 5**Yearly income  
of household  
membersOn line 8 through line 13 enter your total household income for the 2003 calendar year.  
See instructions on page 6 and page 7.

(Dollars) (Cents)

8. Social Security and/or Railroad Retirement ..... 8.
9. Interest, Dividends, and/or Gain (or Loss) ..... 9.
10. Pensions, Annuities, and IRA distributions ..... 10.
11. SSI/SSP, AB, and ATD (Gold Check). See page 7 ..... 11.  
(full-year total)
12. Rental and Business Income (or Loss) ..... 12.  
See page 7. Do not enter your monthly rent payments.
13. Other Income (including wages). See page 7 ..... 13.
14. SUBTOTAL. Add line 8 through line 13 ..... 14.

**STEP 6**Adjustments  
to income

15. Adjustments to income. See page 7 ..... 15.

**STEP 7**Total household  
incomeDo you receive Temporary Assistance for Needy Families,  
formerly Aid to Families with Dependent Children (AFDC)?☐ YES ☐ NO

16. TOTAL HOUSEHOLD INCOME IN 2003.

- Subtract line 15 from line 14 ..... • 16.
- If line 16 is more than \$38,505, STOP. You do not qualify.

**STEP 8**Renter  
assistance  
claimedYou do not have to complete line 17. If you stop here, we will figure the amount of  
assistance for you.

17. Renter assistance claimed. (Cannot exceed \$347.50)

- See page 8 ..... ■ 17.

**Reminder**If this is your first year filing a Renter Assistance claim and you did not receive SSI, please  
provide proof of your age, disability, or blindness.If you filed a claim last year and are under 62 years old, you will need to provide proof of your  
temporary disability if you did not receive SSI. (This is an annual requirement.)**STEP 9**Signature,  
date, and  
telephone  
number**Caution:** To avoid delay of your check, be sure to provide all requested information, sign below,  
and mail to: **FRANCHISE TAX BOARD, PO BOX 942886, SACRAMENTO CA 94286-0904.**I authorize the Franchise Tax Board to match my name and the information provided herein, as well as information necessary  
to process my claim, against information gathered from public records, the files of the Department of Health Services, and  
other state or federal agencies to confirm my eligibility for the Renter Assistance Program.Under penalties of perjury, I declare that this claim and all statements regarding my eligibility and citizenship or alien status,  
including accompanying schedules and any additional information I may provide to the Franchise Tax Board are to the best of  
my knowledge, true, correct, and complete.

Sign Here ➡

X \_\_\_\_\_ Date \_\_\_\_\_  
Claimant's signature

Claimant's Daytime Telephone Number • ( ) \_\_\_\_\_

Paid  
Preparer's  
Use OnlyPREPARED'S  
SIGNATURE ▶

Date

Check if  
self-employed ☐

Preparer's social security number/PTIN

FIRM'S NAME (OR YOURS, IF  
SELF-EMPLOYED) AND ADDRESS ▶

FEIN

TELEPHONE ( ) \_\_\_\_\_

Do not write in this space

Do not write in this space

L	D	I	A	R	RES

# Worksheet to Figure the Amount of Renter Assistance, Form FTB 9000R

If you want, we will figure the amount of renter assistance for you. You may, however, figure this amount as follows:

If you were a qualified renter for **all of 2003**, your allowable assistance will be based on the total household income (form FTB 9000R, line 16) as shown in the Renter Assistance Schedule below.

If you were a qualified renter for **less than 12 months** during 2003 complete line 1 through line 4 to figure your assistance.

1. Enter the amount of assistance from the Renter Assistance Schedule below for your total household income shown on form FTB 9000R, line 16 ..... 1. \$ \_\_\_\_\_
2. Enter the total number of months during 2003 that you lived in a qualified rented residence in California shown on form FTB 9000R, line 5 ..... 2. x \_\_\_\_\_
3. Multiply the amount on line 1 by the number on line 2 ..... 3. \$ \_\_\_\_\_
4. Divide the answer on line 3 by 12 (months). This is your allowable assistance. Enter this amount on form FTB 9000R, line 17 ..... 4. \$ \_\_\_\_\_

**Example for renter less than one year:** Total household income is \$13,477 and the residence was rented for 9 months.

1. Amount of assistance from the Renter Assistance Schedule below ..... 1. \$ 297.50
2. Number of months shown on form FTB 9000R, line 5 ..... 2. x 9
3. Multiply line 1 by line 2 ..... 3. \$2,677.50
4. Divide line 3 by 12 (months). This is your allowable assistance ..... 4. \$ 223.00

## Renter Assistance Schedule

If your total household income is		Your renter assistance is	If your total household income is		Your renter assistance is
From	To		From	To	
\$0	\$9,625	\$347.50	21,180	21,821	147.50
9,626	10,267	340.00	21,822	22,463	135.00
10,268	10,909	332.50	22,464	23,103	122.50
10,910	11,551	327.50	23,104	23,744	112.50
11,552	12,193	320.00	23,745	24,388	102.50
12,194	12,835	312.50	24,389	25,029	90.00
12,836	13,476	305.00	25,030	25,670	80.00
13,477	14,118	297.50	25,671	26,311	72.50
14,119	14,760	290.00	26,312	26,953	65.00
14,761	15,403	282.50	26,954	27,595	57.50
15,404	16,043	275.00	27,596	28,237	50.00
16,044	16,685	265.00	28,238	28,879	42.50
16,686	17,328	250.00	28,880	30,484	37.50
17,329	17,970	235.00	30,485	32,088	30.00
17,971	18,611	220.00	32,089	33,693	25.00
18,612	19,252	207.50	33,694	35,297	22.50
19,253	19,894	192.50	35,298	36,901	17.50
19,895	20,535	177.50	36,902	38,505	15.00
20,536	21,179	162.50	\$38,506	And Over	0.00